



## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

### **Agency for Healthcare Research and Quality**

#### **Agency Information Collection Activities: Proposed Collection; Comment Request**

**AGENCY:** Agency for Healthcare Research and Quality, HHS.

**ACTION:** Notice.

**SUMMARY:** This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project “Child Hospital Consumer Assessment of Healthcare Providers and Systems (Child HCAHPS) Survey Database.” This proposed information collection was previously published in the *Federal Register* on June 3<sup>rd</sup>, 2022, and allowed 60 days for public comment. AHRQ did not receive comments from members of the public during this period. The purpose of this notice is to allow an additional 30 days for public comment.

**DATES:** Comments on this notice must be received by (insert date 30 days after date of publication in the *Federal Register*).

**ADDRESSES:** Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to [www.reginfo.gov/public/do/PRAMain](https://www.reginfo.gov/public/do/PRAMain). Find this particular information collection by selecting "Currently under 30-day Review - Open for Public Comments" or by using the search function.

**FOR FURTHER INFORMATION CONTACT:** Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427-1477, or by email at [doris.lefkowitz@AHRQ.hhs.gov](mailto:doris.lefkowitz@AHRQ.hhs.gov).

#### **SUPPLEMENTARY INFORMATION:**

##### **Proposed Project**

**Child Hospital Consumer Assessment of Healthcare Providers and Systems (Child HCAHPS) Survey Database**

The Child Hospital CAHPS Survey (Child HCAHPS) assesses the experiences of pediatric patients (less than 18 years old) and their parents or guardians with inpatient care. It complements the Adult Hospital CAHPS Survey (Adult HCAHPS), which asks adult inpatients about their experiences. The Child HCAHPS Database is a voluntary database available to all Child HCAHPS users to support both quality improvement and research to enhance the patient-centeredness of care delivered to pediatric hospital patients.

**Rationale for the information collection.** Like the survey instrument itself and related toolkit materials to support survey implementation, aggregated Child HCAHPS Database results are made publicly available on AHRQ's CAHPS website. Technical assistance is provided by AHRQ through its contractor at no charge to hospitals to facilitate the access and use of these materials for quality improvement and research. Technical assistance is also provided to support Child HCAHPS data submission.

The Child HCAHPS Database supports AHRQ's goals of promoting improvements in the quality and patient-centeredness of health care in pediatric hospital settings. This research has the following goals:

1. Improve care provided by individual hospitals and hospital systems.
2. Offer several products and services, including providing survey results presented through an Online Reporting System, summary chartbooks, custom analyses, private reports and data for research purposes.
3. Provides information to help identify strengths and areas with potential for improvement in patient care.

Survey data from the Child HCAHPS Database will be used to produce three types of reporting products:

- Hospital Feedback Reports. Hospitals that submit data will have access to a customized report that presents findings for their individual submission along with results from the database overall. These "private" hospital feedback reports will display sortable results for each of the

Child HCAHPS core composite measures and for each individual survey item that forms the composite measure.

- Child HCAHPS Chartbook. A summary-level Chartbook will be compiled to display top box and other proportional scores for the Child HCAHPS items and composite measures broken out by selected hospital characteristics (e.g., region, hospital size, ownership and affiliation, etc.).
- AHRQ Data Tools Website. Aggregate results also will be made publicly available through an interactive, web-based system that allows users to view survey items and composite results in a variety of formats.

The OMB Control Number for the Child HCAHPS Survey Database is 0935-0243, which was last approved by OMB on July 24, 2019, and will expire on July 30, 2022.

This study is being conducted by AHRQ through its contractor, Westat, pursuant to AHRQ's statutory authority to conduct and support research on health care and on systems for the delivery of such care, including activities with respect to: the quality, effectiveness, efficiency, appropriateness and value of healthcare services; quality measurement and improvement; and health surveys and database development. 42 U.S.C 299a(a)(1), (2), and (8).

### **Method of Collection**

To achieve the goals of this project, the following activities and data collections that constitute information collection under the Paperwork Reduction Act will be implemented:

- Registration with the submission website to obtain an account with a secure username and password. The point-of-contact (POC), often the hospital, completes a number of data submission steps and forms, beginning with the completion of the online registration form. The purpose of this form is to collect basic contact information about the organization and initiate the registration process;
- Submission of signed Data Use Agreements (DUAs) and survey questionnaires. The purpose of the data use agreement, completed by the participating hospital, is to state how data submitted by or on behalf of hospitals will be used and provides confidentiality assurances;

- Submission of hospital information form. The purpose of this form completed by the participating organization, is to collect background characteristics of the hospital; and
- Follow-up with submitters in the event of a rejected file, to assist in making corrections and resubmitting the file.

### **Estimated Annual Respondent Burden**

Exhibit 1 shows the estimated burden hours for the respondent to participate in the database. The 302 POCs in Exhibit 1 are a combination of an estimated 300 hospitals that currently administer the Child HCAHPS survey and the two survey vendors assisting them.

Each hospital will register online for submission. The online Registration form will require about 5 minutes to complete. Each submitter will also complete a hospital information form. The online hospital information form takes on average 5 minutes to complete. The DUA will be completed by each of the 300 participating hospitals. Survey vendors do not sign or submit DUAs. The DUA requires about 3 minutes to sign and upload to the online submission system. Each submitter, which in most cases will be the survey vendor performing the data collection, will provide a copy of their questionnaire and the survey data file in the required file format. Survey data files must conform to the data file layout specifications provided by the Child HCAHPS Database. Since the unit of analysis is at the hospital level, submitters will upload one data file per hospital. Once a data file is uploaded, the file will be automatically checked to ensure it conforms to the specifications and a data file status report will be produced and made available to the submitter. Submitters will review each report and will be expected to correct any errors in their data file and resubmit if necessary. It will take about one hour to submit the data for each hospital. The total burden is estimated to be 365 hours annually.

**Exhibit 1. Estimated Annualized Burden Hours**

Form Name	Number of respondents/ POCs	Number of responses per POC	Hours per response	Total burden hours
Registration Form	300	1	5/60	25
Hospital Information Form	300	1	5/60	25
Data Use Agreement	300	1	3/60	15
Data Files Submission	2	150	1	300
Total	NA	NA	NA	365

Exhibit 2 shows the estimated annualized cost burden based on the respondents' time to complete one submission process. The cost burden is estimated to be \$18,076 annually.

**Exhibit 2. Estimated annualized cost burden**

Form Name	Number of respondents	Total Burden hours	Average Hourly Wage Rate*	Total Cost burden
Registration Form	300	25	57.12 <sup>a</sup>	\$1,428
Hospital Information Form	300	25	57.12 <sup>a</sup>	\$1,428
Data Use Agreement	300	15	95.12 <sup>b</sup>	\$1,426
Data Files Submission	2	300	45.98 <sup>c</sup>	\$13,794

Total	302**	365	NA	\$18,076
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\* National Compensation Survey: Occupational wages in the United States May 2020, “U.S. Department of Labor, Bureau of Labor Statistics.”

a) Based on the mean hourly wage for Medical and Health Services Managers (11-9111).

b) Based on the mean hourly wage for Chief Executives (11-1011).

c) Based on the mean hourly wages for Computer Programmer (15-1131).

\*\*The 300 POC listed for the registration form, hospital information form and the data use agreement are the estimated POC’s from the estimated participating hospitals.

### **Request for Comments**

In accordance with the Paperwork Reduction Act, 44 U.S.C. 3501-3520, comments on AHRQ’s information collection are requested with regard to any of the following: (a) whether the proposed collection of information is necessary for the proper performance of AHRQ’s health care research and health care information dissemination functions, including whether the information will have practical utility; (b) the accuracy of AHRQ’s estimate of burden (including hours and costs) of the proposed collection(s) of information; (c) ways to enhance the quality, utility and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information upon the respondents, including the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and included in the Agency’s subsequent request for OMB approval of the proposed information collection. All comments will become a matter of public record.

Dated: August 30, 2022.

**Marquita Cullom,**

*Associate Director.*

